

MECHANICAL PERMIT APPLICATION

Gallatin, Tennessee

Date Applied ____/____/20____



Project Address		Subdivision		Phase	Section	Lot #
Owner		Mailing Address		Phone		Email
Contractor		Mailing Address		Phone		Email
Class of Work						
<input type="checkbox"/> New Construction		<input type="checkbox"/> Addition		<input type="checkbox"/> Remodel		<input type="checkbox"/> Repair
						<input type="checkbox"/> Change Out
Valuation		Use of Building		<input type="checkbox"/> Residential		<input type="checkbox"/> Commercial
				<input type="checkbox"/> Multi-Family		<input type="checkbox"/> Industrial
Appliances		Quantity		Appliances		Quantity
Dryer		_____		Gas Cooking		_____
Duct System		_____		Gas Dryer		_____
Exhaust Fan		_____		Gas Fireplace		_____
Grease Duct		_____		Gas Water Heater		_____
HVAC unit		_____		Outdoor Gas Appliance		_____
System Type _____						
Fuel Type _____						
Kitchen Hood System		_____				

This permit becomes null and void if work or construction authorized is not commenced within 6 months or if construction or work is suspended or abandoned for a period of 6 months at any time after work in commenced.

In the event the licensed contractor disclosed hereon is replaced on this project, the Gallatin Building Department shall be immediately notified. Failure to notify may result in revocation of this permit and is a violation of state law.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor or Authorized Agent

Date

Signature of Owner

Date